| _  |   | 1-11078                                    |                               |                |                                 |                  |          |                   |  |      |                               |                        |  |
|--|---|--|-------------------------------|----------------|---------------------------------|------------------|----------|-------------------|--|------|-------------------------------|------------------------|--|
| •  | PATENT  | APPLICATIO                                 | N FEE D                       | RD             | Application or Docket Number  D |                  |          |                   |  |      |                               |                        |  |
| Effective October 1, 2003 6751978  |   |  |                               |                |                                 |                  |          |                   |  |      |                               |                        |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                           |   |  |                               |                |                                 |                  |          | SMALL ENTITY TYPE |  |      | OTHER THAN<br>OR SMALL ENTITY |                        |  |
| TO   | TAL CLAIMS                                    |  | 90                            |                |                                 |                  | R        | ATE               | FEE  | 1    | RATE                          | FEE                    |  |
| FOR  |   |  | NUMBER FILED                  |                | NUMBER EXTRA                    |                  | BAS      | C FEE             | 385.00   | OR   | BASIC FEE                     | 770.00                 |  |
| ΤC   | TAL CHARGE                                    | ABLE CLAIMS                                | 9 0 minus 20=                 |                | •                               |                  | X        | X\$ 9=            |  | OR   | X\$18=                        |                        |  |
| INDEPENDENT CLAIMS   |   |  | minus 3 =                     |                |                                 |                  | ×        | X43=              |  | OR   | X86=                          |                        |  |
| MIL  | ILTIPLE DEPEN                                 | IDENT ÇLAIM PI                             | RESENT                        | <u></u>        |                                 |                  |          | +145=             |  | 1    | +290=                         |                        |  |
| • If the difference in column 1 is less that zero, enter "0" in column 2 |   |  |                               |                |                                 |                  | <u> </u> | TOTAL W           |  | OR   |                               |                        |  |
| ä  | molit.  | IC   | HAL                           | 1. AR          | OR                              | TOTAL            | THAN     |                   |  |      |                               |                        |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)            |   |  |                               |                |                                 |                  | SM       | ALL               | ENTITY   | OR   | OTHER<br>SMALL I              |                        |  |
| <u> </u>   | (Column 1)<br>CLAIMS                          |  | 1                             | HIGH           | EST                             | ST               |          |                   |  |      |                               | ADDI-                  |  |
| AMENDMENT A  |   | REMAINING<br>AFTER<br>AMENDMENT            |                               | PREVIO PAID F  |                                 | PRESENT<br>EXTRA | P./      | TE                | ADDI-<br>TIONAL<br>FEE                           |      | RATE                          | TIONAL FEE             |  |
|  | Total   | . 20                                       | Minus                         | -2             | D                               | = /              | XS       | 9=                | /  | OR   | X\$18=                        |                        |  |
|  | tndependent                                   |  |                               | <b>3</b> .     | =                               | X                | 3=       |                   | ОЯ   | X86= | 7                             |                        |  |
| Ľ  | FIRST PRESE                                   | INST PRESENTATION OF MULTIPLE DEPENDE      |                               | PENDENT        | T CLAIM                         |                  |          | 45=               |  |      | +290=                         | /                      |  |
| 10:17:08 (Column 1) (Column 2) (Column 3)                                |   |  |                               |                |                                 |                  |          | OTAL              | <del>                                     </del> | OR   | TOTAL                         | /                      |  |
|  |   |  |                               |                |                                 |                  |          | FEE               | <del>-  </del>                                   | OR   | ADDIT. FEE                    |                        |  |
|  | 1 1100  | (Column 1)                                 | (Column 2) (Column 3) HIGHEST |                |                                 | · -              |          | 1001              | )  |      | ADDI-                         |                        |  |
| AMENOMENT B  |   | REMAINING<br>AFTER<br>AMENDMENT            |                               | PREVIO<br>PAID | USLY                            | PRESENT<br>EXTRA | R/       | TE                | ADDI<br>TIONAL<br>FEE                            |      | RATE                          | TIONAL                 |  |
|  | Total   | . 20                                       | Minus                         | - 2            | Ō                               | <u>a</u>         | X\$      | 9=                | . /  | OR   | X\$18=                        |                        |  |
|  | Independent                                   | . 2  | Minus                         | *** 2          | <i>)</i>                        | =                | X4       | 3=                |  | OR   | . X86≃                        |                        |  |
| Ļ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAI |  |                               |                | CLAIM                           |                  |          | 5=                |  | OR   | +290=                         |                        |  |
| 1115 <sub>0</sub>  |   |  |                               |                |                                 |                  |          | OTAL              |  | 00   | TOTAL                         | /                      |  |
| 1  |   |  |                               |                |                                 |                  |          | FEE               |  | ОН   | ADDIT. FEE                    | 7                      |  |
|  |   | (Column 1)<br>CLAIMS                       |                               | (Colum         |                                 | (Column 3)       | ·<br>ا   |                   | \<br>  | 1 1  |                               |                        |  |
| AMENDMENT C  | •   | REMAINING<br>AFTER<br>AMENDMENT            |                               | PREVIO         | BER<br>XUSLY                    | PRESENT<br>EXTRA | RA       | TE,               | ADDI-<br>TIONAL<br>FEE                           |      | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | •  | Minus                         | •              |                                 | a a              | X\$      | 9=                | FEE.   | OF   | X\$18=                        | FFE.                   |  |
|  | Independent                                   | •  | Minus                         | ***            |                                 | D                | <b>—</b> |                   | -  | OR   |                               |                        |  |
|  | FIRST PRESE                                   | NTATION OF ML                              | LTIPLE DEPENDENT              |                | CLAIM                           |                  | . X4     | 3=                |  | OR   | X86=                          |                        |  |
|  |   | +14  | 5=                            |                | OR                              | +290=            |          |                   |  |      |                               |                        |  |
|  |   | mn I is less than th<br>mber Previously Pa |                               |                |                                 |                  | ADDIT    | OTAL              |  | OR   | TOTAL<br>ADDIT. FEE           |                        |  |
|  | If the "Highest Nu                            | mber Previously Pa<br>iber Previously Paid | id For IN THI                 | S SPACE &      | s less tha                      | n 3, enter *3.*  | ~~~      |                   | propriate box                                    |      |                               |                        |  |